

Bridgeport Sites 968 Fairfield Avenue Bridgeport, CT 06605 (203) 330-6000

46 Albion Street (203) 330-6000

1046 Fairfield Avenue Bridgeport, CT 06605 (203) 330-6054

510 Clinton Avenue Bridgeport, CT 06605 (203) 366-4000

743 South Avenue Bridgeport, CT 06604 (203) 330-6010

School Based Health Centers Bassick High School Central High School Blackham School Read School Roosevelt School Cesar Batalia

Homeless Shelters Bridgeport Sites CASA Helping Hand Pivot Ministries Prospect House Brooks Street Shelter Harrison Apartments Fairfield Site Operation Hope

WIC Site 1020 Fairfield Avenue Bridgeport, CT 06605



## Testimony of

## Katherine S. Yacavone, President and Chief Executive Officer Southwest Community Health Center, Inc. 46 Albion St. Bridgeport, CT 06605

## On Department of Public Health's Proposal on Financial Assistance for Community Health Centers

Good morning Senators Harp and Gerratana, Representatives Walker and Johnson and Committee members. Thank you for holding this public hearing regarding the DPH line item funding for community health centers (CHCs). DPH funding supports delivery of primary care to the State's most vulnerable populations. The current primary health care needs of state residents and funding appropriations since 2010 are presented in the Department's Report.

Over several years, the origin of the methodology for this important line item funding has been lost and grants to CHCs did not conform to the methodology. As a result, several health centers that received initial line item funding, like Southwest Community Health Center (SWCHC), have, over a decade, expanded primary care service delivery to an increased number of uninsured clients, while line item funds have been dramatically reduced. For calendar year 2012, SWCHC rendered primary care services to 20, 138 unduplicated clients, 27.5% (5,549) were uninsured and in 2008, SWCHC served 5,495 uninsured persons. While the level of uninsured persons has remained fairly constant over the past 5 years, the cost of adding expanded primary care services (e.g. mental health) has increased and SWCHC's funding has plunged from \$411,421 in 2008 to a current level of \$243,461, a drop of 59%. This funding directly supports physicians, dentists, and mid level providers. A drop of this magnitude in DPH funding has impacted my ability to retain and recruit providers.

I urge both committees to ask the Department of Public Health to develop a new methodology that is equitable for all CHCs, so "winners and losers" are not created. Access to care is eroded if CHCs do not have sufficient revenue to retain a primary care workforce to treat uninsured clients. I recommend that CHCs be "held harmless" at least at their current funding levels, so that no center receives less money as a new formula is established. Additional funds may have to be allocated to the Community Health Services line item to achieve a more equitable formula.

Whatever formula is ultimately developed, I would urge that contract quarterly payments to CHCs be distributed in a timely manner. CHCs continue to fulfill the contract requirements and provide services every day to uninsured state residents; but, our ability to continue to do so without timely reimbursement places a great financial strain on the agency budgets that are already stressed.

Southwest Community Health Center is a federally qualified health center (FQHC) based in Bridgeport that serves over 20,000 people annually, delivering primary medical care, medical specialty care, mental health and substance abuse treatment and dental care. As the Committee members know, FQHCs turn no patients away – regardless of ability to pay. For Southwest, care is provided in a variety of locations – 18 health center locations in our state's largest and poorest city. Adequate support from the Department of Public Health is critical to SWCHC's ability to deliver quality, person centered care to over 5,500 uninsured patients annually.

Thank you for your attention.

Katherine S. Yacavone
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President/CEO

SWCHC

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